Recommended Doses of Currently Licensed

Monovalent Hepatitis B Vaccines				06
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Merck Recombivax HB SKB Engerix-B Group Dosage Dosage

Infants.* children & adolescents 5 mcg (0.5 mL)**

(Birth through 19 years of age) Pediatric/Adolescent Formulation

YELLOW Top Vial

10 mcg (1.0 mL)

GREEN Top Vial

40 mcg (1.0 mL)

Dialysis Formulation **BLUE** Top Vial

Both vaccines are routinely administered in a three-dose series. Engerix-B has also been licensed for a fourdose series administered at 0, 1, 2, and 12 months. For dialysis patients, Engerix-B is to be administered at 0, 1

Sources: MMWR, Centers for Disease Control, November 22, 1991/Vol. 40/No. RR-13. MMWR, CDC, March

*Infants born to HBsAg-positive mothers should also receive hepatitis B immune globulin (HBIG) 0.5

**Change in dose licensed 1998. Infants born to HBsAg-negative mothers now receive the same dose

appropriate dosage can be achieved from another formulation provided that the total volume of vaccine

mL administered intramuscularly at a site different from that used for the hepatitis B vaccine.

as infants born to HBsAg-positive mothers. "If the suggested formulation is not available, the

Adult Formulation

10 mcg (0.5 mL)***

LIGHT BLUE Top Vial

Pediatric Formulation

20 mcg (1.0 mL)

40 mcg (2.0 mL)

(Two 20 mcg doses)

ORANGE Top Vial

Adult Formulation

Adapted with permission from:

Immunization Program

Georgia Department of Human Resources

ORANGE Top Vial

Adult Formulation

immunocompromised persons

mcg

mL SKB

2, and 6 months.

Hepatitis B Program

DOH Pub 347-229 (Rev. 11/98)

Adults

(20 years of age & older)

Dialysis patients & other

HBsAg = Hepatitis B surface antigen

= SmithKline Beecham

administered does not exceed 1 mL."

***Change in adolescent dose licensed 1995.

10, 1995/Vol. 44/No. 9. Recombivax HB package insert, August 1998.

= microgram

= milliliter